Johnson & Johnson
CONSUMER & PERSONAL PRODUCTS WORLDWIDE
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June 24, 2004

Division of Dockets Management (HFA-305)
Food and Drug Administration
5630 Fishers Lane, Room 1061
Rockville, MD 20857

Re: Docket No. 2003N-0539: Over-The-Counter Drug Products; Safety and Efficacy; Request for Information on the OTC use of Phenazopyridine HCl as a Urinary Tract Analgesic

Dear Sir or Madam:

These comments are provided in response to FDA's December 31, 2003 Federal Register Notice (68 FR 75585-75591) requesting information about marketed urinary analgesic/antiseptic drug products which have not been subject to FDA's OTC drug review.

The information and comments provided address the questions regarding phenazopyridine hydrochloride listed by FDA in the aftermentioned Federal Register Notice (p. 75588).

The continued OTC marketing status of phenazopyridine hydrochloride is supported by its' extensive use history, the ability of the consumer to readily identify the symptoms of urinary tract pain and discomfort as well as labeling which provides adequate information for use and directs the sufferer to seek additional help from a health professional.

Sincerely,

George Latyszonek
Director, Regulatory Affairs

cc:
Division of OTC Drug Products (HFD-560)
Center for Drug Evaluation and Research
Food and Drug Administration
5600 Fishers Lane
Rockville, MD 20857

2003N-0539 C5

1.) Is this condition appropriate for self-medication?

Self-medication to treat and temporarily relieve the pain, burning, urgency, and frequency of urination that often accompanies urinary infection is an appropriate over-the-counter indication. As with any other over-the-counter analgesics the intent of treatment is not to eliminate infection or cure disease but to temporarily relieve pain symptoms. Pain and discomfort is readily recognizable and does not require the intervention of a health professional to confirm its presence during urination. Treatment of a potentially underlying infection does require the intervention of a physician to diagnose and prescribe appropriate treatment. The labeling of urinary analgesic products clearly instruct the consumer to seek appropriate medical attention if symptoms persist beyond a specific time and also informs the consumer of the limitations of the medications to symptomatic relief.

2.) If the answer to the first question is yes, should the product labeling mention the possible need for treatment with an antibacterial drug also?

The labeling should direct the consumer to seek the advice of a physician for diagnosis and treatment if symptoms persist. The labeling should not suggest a particular course of therapy (e.g. antibacterial) since that should be determined after diagnosis by a physician.

3.) **Is there a valid basis for having single-ingredient prescription products with a 200mg dosage and OTC products with a 190 to 195mg dosage? What data support these dosages?**

The symptoms to be treated are self-diagnosable and self-treatable and therefore single ingredient products intended to treat the discomfort sometimes associated with urination should only be available over-the-counter. Phenazopyridine hydrochloride has been safely and effectively used in the United States since 1914 and has been used over-the-counter for over 40 years. There has been no evidence of adverse experiences to suggest the phenazopyridine should not be an over-the-counter ingredient.

FDA recognized that phenazopyridine is appropriate for symptomatic relief as an over-the-counter medication in its DESI (Drug Efficacy Safety Implementation) Review (48FR34516, July 29, 1983) and specified conditions under which it could be marketed as an over-the-counter product.

A recent clinical trial "Evaluation of the Efficacy of Phenazopyridine Hydrochloride as a Urinary Analgesic in Women with Urinary Tract Infections" demonstrated that phenazopyridine hydrochloride was superior to placebo in the short term treatment of urinary symptoms. (Attachment 1)

4.) Have any epidemiological studies been done since 1978 that address the neoplasia findings in the NCI technical report?

5.) Are the neoplasia findings of sufficient concern to restrict this drug to prescription status?

6.) Do consumers adequately understand the required carcinogenesis labeling statement? If the answer is no, how should this statement be revised?

7.) Should the carcinogenesis labeling statement be required to appear on the outer package labeling, or is it adequate that it appear only in the package insert?

Response to Questions 4 – 7

There is insufficient evidence to warrant the inclusion of a carcinogenesis labeling statement on products containing phenazopyridine hydrochloride. The agency imposed statement is based on data from long term animal studies which utilized grossly exaggerated doses of phenazopyridine not reflective of the doses or duration of use for either prescription or over-the-counter products. The study conclusions did not suggest any connection between phenazopyridine and human neoplasia. In an epidemiological study of 2,214 patients who received phenazopyridine hydrochloride and were followed for 3 years, no significant excess of cancer was observed (IARC, 1987).

Labeling of over-the-counter drug products is intended to ensure that the average consumer can accurately self-treat their symptoms and/or disease state. Warnings and precautions should be based on clinical observations and should assist consumers to use the chosen medication safely and effectively. Inclusion of a theoretically based carcinogenesis statement has the potential to cause unnecessary concern, confusion and could deter a consumer from seeking relief.